

SUPPLEMENTAL QUESTIONNAIRE

Correctional Officer II

NAME: _____

Social Security Number _____

You must complete and submit this application supplement in order to participate in this recruitment. Based on your responses, your job related training and experience will be evaluated using a pre-determined formula.

NOTE: *Resumes, letters and other materials will not be evaluated or considered as responses to the items in the supplement.*

INSTRUCTIONS:

In the boxes to the right of each item, mark an "X" in the box that corresponds with your training or experience.

	2 to 4 years experience	5 to 7 years experience	8 to 10 years experience	11 years or more experience
Experience involving control and custody of incarcerated adults				
Experience in maintaining centralized jail security and ensuring inmate welfare in accordance with laws, codes and regulations governing inmate control				
Experience as a full time classification officer				
Experience in searching, examining, instructing and logging in inmates				
Experience assisting medical staff in the distribution of medications				
Experience supervising and monitoring inmate trustees assisting with housekeeping, meal preparation and distribution, laundry and/or similar activities				
Experience preparing reports and maintaining accurate records, logs and files				
Experience in booking prisoners, completing the necessary forms, take photographs and fingerprints and perform other processing activities				
Experience interviewing inmates, classifying them and assigning them to appropriate detentions areas and/or activities.				
Experience testifying in court.				
Experience working as a gang officer or interviewing gang members and confirming gang affiliations				
Experience maintaining STC training records				
Experience as a certified Weaponless Defense Instructor				
Experience as a certified Impact Weapons Instructor				

	2 to 4 years experience	5 to 7 years experience	8 to 10 years experience	11 years or more experience
Experience as an assigned Jail Training Officer or in training new employees				
Experience as a OC Spray Instructor				
Experience as a member of a Critical Incident Response Team (CIRT)				
Experienced following written policies and procedures related to the operations of a jail facility	YES <input type="checkbox"/>		NO <input type="checkbox"/>	

I certify that all the statements made in this application supplement are true, complete, and correct to the best of my knowledge and are made in good faith. I understand that any misrepresentation and/or falsification of my answers may make me ineligible to continue in this recruitment. My signature authorizes Placer County to make any appropriate investigations to verify information.

Signature of Applicant: _____ Date: _____